

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME ExxonMobil Everett Terminal

ADDRESS 52 Beacham Street  
Everett, MA 02149

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

Form Approved.  
OMB No. 2040-0004

MA0000833	01A-A
PERMIT NUMBER	DISCHARGE NUMBER

FACILITY LOCATION 52 Beacham Street  
Everett, MA 02149

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
2013	09	01	TO	2013	09	30

☐ Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
00056 Flow Rate	SAMPLE MEASUREMENT	0.029	0.290	MGD					0	99/99	MT
	PERMIT REQUIREMENT	Monthly Average	Daily Maximum							Continuous	Meter
00400 pH	SAMPLE MEASUREMENT				7.2		7.2	SU	0	01/30	GR
	PERMIT REQUIREMENT				>=6.5 Minimum		<=8.5 Maximum			Monthly	Grab
00530 Solids, total suspended	SAMPLE MEASUREMENT					25	25	mg/L	0	01/30	GR
	PERMIT REQUIREMENT					<= 30 Monthly Avg	<= 100 Daily Max			Monthly	Grab
00556 Oil & Grease	SAMPLE MEASUREMENT						<1.53	mg/L	0	01/30	GR
	PERMIT REQUIREMENT						<= 15 Daily Maximum			Monthly	Grab
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Damian Guzman  
Terminal Superintendent

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

617 381-2802

AREA CODE

NUMBER

DATE

2013 10 15

YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No violations. Submitting this form in lieu of web-based NetDMR system down for federal government shutdown as of October 1, 2013.  
Permitted Feature: 01A - External Outfall, Discharge A - Corrugated Plate Separator